



976 U.S. P.T. 9/76 12 91/16/01

|  |       |                      |
|--|-------|----------------------|
|  |       | Subclass             |
|  | Class | ISSUE CLASSIFICATION |

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**PATENT NUMBER**

**U.S. UTILITY Patent Application**

|  |                             |
|--|-----------------------------|
| <b>O.I.P.E.</b><br><br>SCANNED <u>1114</u> Q.A. <u>AA</u> | <b>PATENT DATE</b><br>_____ |
|--|-----------------------------|

|              |          |                  |          |
|--------------|----------|------------------|----------|
| CLASS<br>370 | SUBCLASS | ART UNIT<br>2661 | EXAMINER |
|--------------|----------|------------------|----------|

|                 |            |       |          |          |                                  |
|-----------------|------------|-------|----------|----------|----------------------------------|
| APPLICATION NO. | CONT/PRIOR | CLASS | SUBCLASS | ART UNIT | EXAMINER                         |
| 09/761221       | F          | 370   | 278      | 2661     | <i>Nguyen, H.<br/>VANDEGRIFT</i> |

Meng et al. / Maternal Health

APPLICANTS

communicating by stems, relay apparatus, and eyes, and communicating by light.

TIME

PTO-2040  
12/99

## **ISSUING CLASSIFICATION**

| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>   | <b>DRAWINGS</b>                                       |             |            | <b>CLAIMS ALLOWED</b>             |                      |
|---|---|-------------|------------|-----------------------------------|----------------------|
|   | Sheets Drwg.  | Figs. Drwg. | Print Fig. | Total Claims                      | Print Claim for O.G. |
| <input type="checkbox"/> The term of this patent<br>subsequent to _____ (date)<br>has been disclaimed.  |   |             |            | <b>NOTICE OF ALLOWANCE MAILED</b> |                      |
|   | _____<br>(Assistant Examiner) _____<br>(Date)         |             |            |                                   |                      |
| <input type="checkbox"/> The term of this patent shall<br>not extend beyond the expiration date<br>of U.S Patent. No. _____<br><br>_____<br><br>_____ |   |             |            | <b>ISSUE FEE</b>                  |                      |
|   | _____<br>(Primary Examiner) _____<br>(Date)           |             |            | Amount Due                        | Date Paid            |
| <input type="checkbox"/> The terminal _____ months of<br>this patent have been disclaimed.  |   |             |            | <b>ISSUE BATCH NUMBER</b>         |                      |
|   | _____<br>(Legal Instruments Examiner) _____<br>(Date) |             |            |                                   |                      |

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